Patent Attorney Docket No. 450100-05119

In re	Patent Application of								
Naoki	Ode	Group Art Unit: 2195							
Application No.: 10/560,021		Examiner: Bryant, Douglas J.							
Filed:	December 8, 2005	Confirmation No.: 1011							
For:	RESOURCE MANAGING METHOD, RESOURCE MANAGING APPARATUS, RESOURCE MANAGING PROGRAM AND STORAGE MEDIUM FOR MANAGING RESOURCE USAGE RIGHTS IN A FLEXIBLE MANNER								
AMENDMENT/REPLY TRANSMITTAL LETTER									
Mail Stop Amendment Date: February 23, 2010 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450									
Sir:									
Enclos	sed is an Amendment under 37 C.F.R. § 1.111	for the above-identified patent application.							
	A Petition for Extension of Time of one month is enclosed.								
	Terminal Disclaimer(s) and the \square \$ 65 \square \$ 130 fee per Disclaimer due under 37 C.F.R. \$ 1.20(d) are enclosed.								
\boxtimes	Also enclosed is a certified translation of the priority document.								
	Small entity status is hereby claimed.								
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$405 \$\sqrt{8}10\$ fee due under 37 C.F.R. § 1.17(e).								
	Applicant(s) request that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.								
	Applicant(s) previously submitted which continued examination is requested.	on for							
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in								

	accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. §1.17(i) is enclosed.									
	A Request for Entry and Consideration of Submission under 37 C.F.R. §1.129(a) (1809/2809) is also enclosed.									
\boxtimes	No additional claim fee is required.									
	An additional claim fee is required, and is calculated as shown below:									
AMENDED CLAIMS										
		No. of Claims	Highest No of Claims Previously Paid for	Extra Claims	Rate	Add	litional Fee			
Total Claims		11	20	0	x 51 (1202)	\$	0			
Independent Claims		5	5	0	x 220 (1201)	\$	0			
☐ If m	\$	0								
Total (\$	0								
☐ Sm	\$	0								
TOTA	\$	0								
	Chargeto Deposit Account No. 50-0320 for the fee due.									
	A check in the amount ofis enclosed for the fee due.									
	Charge to credit card.									
	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-0320.									
Respectfully submitted,										
Date:_	Prommer Lawrence & Haug LLP Date: February 23, 2010 By: Ellen Marcie Emas Registration No. 32,131									